PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

				or <u>Fax</u>	(571)-273-2885	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7 1 100	,
#	INSTRUCTIONS: This appropriate. All further indicated unless corrects maintenance fee notifica	correspondence including ed below or directed oth	or transmitting the ISSU ig the Patent, advance of terwise in Block 1, by (a	UE FEE and PUBLIC rders and notification a) specifying a new co	ATION FEE (if requ of maintenance fees v orrespondence address	ired). Blocks will be maile ; and/or (b) i	s I through 5 should to the current of indicating a separ	ould be completed when correspondence address a rate "FEE ADDRESS" fo
	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address			20	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
	Bachand Law Office P.O. Box 54244 Phoenix, AZ 85078			AY 1 3 2009 W	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
	The artise		the 1/2	TRACEMARK	MARK HARTERSTEIN			(Depositor's name)
					What front			(Signature)
					MAY	1/, 20	129	(Date)
	APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	гor	ATTORNEY	DOCKET NO.	CONFIRMATION NO.
10/811,327 03/25/2004 Mark A. Hartenstein 95/14/2009 SSESHE2 95050905 195								19811321373
	TITLE OF INVENTION	: SYSTEMS AND MET	HODS FOR MANAGIN	G AFFILIATIONS	01 FC:2501 02 FC:1504			755.00 OP 300.00 OP
	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE TO	TAL FEE(S) DUE	DATE DUE
	nonprovisional	YES	\$755	\$300	\$0		\$1055	05/11/2009
	EXAMINER		ART UNIT	CLASS-SUBCLASS	\neg			
	PHAM, KHANH B		2166	707-102000				
	1. Change of corresponde	ence address or indication	n of "Fee Address" (37	2. For printing on t	he patent front page, li	st		
CFR 1.362). Change of correspondence address (or Change of Correspondence				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
	Address form PTO/SI	3/122) attached. ication (or "Fee Address' 2 or more recent) attach	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
			TO BE PRINTED ON	THE PATENT (print o	r type)			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for								
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
	Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	☐ Individual ☐ C	orporation or	other private grou	up entity Government
	4a. The following fee(s)	are submitted:	41	b. Payment of Fee(s): (ny previousl	y paid issue fee s	hown above)
☐ Issue ₽ Parall Issue ₽ Parall Issue ₽ Parall Issue ₽ Paralle Parall				A check is enclosed. Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies				The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
	5. Change in Entity State	tus (from status indicated	l above)	Overpayment, to I	reposit recount runne		(0001030 00	cada copy of diff form).
		s SMALL ENTITY statu			longer claiming SMA			
	NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requeecords of the United Sta	ired) will not be accepte tes Patent and Trademark	d from anyone other the Office.	an the applicant; a reg	istered attorn	ey or agent; or the	e assignee or other party in
	Authorized Signature	May Sten	1—		Date	ry 11 ,	2009	-
	Typed or printed name	MARIC HY	ENTENSTE IN		Registration l	•		
	an application. Confident	tiality is governed by 35	U.S.C. 122 and 37 CFR	1.14. This collection i	s estimated to take 12	minutes to α	omplete, including	by the USPTO to process g gathering, preparing, and the you require to complete

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.